

# APPLICATION INSTRUCTIONS

## HOUSING OPPORTUNITIES FOR PERSONS WITH AIDS GRANT FUNDS

**FY 2016/2017 EDITION**

**APPLICATIONS WILL ONLY BE ACCEPTED VIA ZOOM GRANTS**

**RELEASE DATE: JANUARY 12, 2016**

**Applications Must Be Typed In Entirety - No Applications With Any Handwritten Entries Will Be Accepted Excluding Signatures and Check boxes**

**A separate application must be submitted for each federally funded program**

**DUE: Monday February 8, 2016 at 3:00 p.m. PST**

HOPWA applicants must submit only one application for funding. Applicants may include a request for more than one program component i.e.: STRMU, Supportive Services, Admin, but only one application will be accepted. Service Only Applicants may request up to \$50,000 maximum for counseling services.

Applicants must be Non-profit agencies planning to target services in the HIV/AIDS community and/or locate projects in the Eligible Metropolitan Statistical Area (EMSA). The Paradise EMSA includes all jurisdictions within Clark County, Nevada.

**Applications must meet the intent of HOPWA's National Goals:**

- Housing Stability
- Access To Care and Support
- Homeless Prevention

**ONLY non-profit agencies, public or private, with current non-profit status are eligible to apply for HOPWA funds. No pending status will be accepted.**

**NOTE: No applications will be accepted after the February 8, 2016 at 3:00 p.m. deadline specified in the publicly advertised Notice for Applications (NFA).**

**PLEASE NOTE: Applicants may request up to a maximum of 75% of their program's budget from the City of Las Vegas HOPWA program.**

### **HOPWA PROGRAM OVERVIEW AND FUNDING**

An overview of this program, and its funding criteria, is found in the HOPWA Project Sponsor Program Manual. The Manual may be downloaded from the City of Las Vegas website at: <http://www.lasvegasnevada.gov/Apply/20721.htm> This information will also aid in understanding the City of Las Vegas' HOPWA project selection criteria.

**IMPORTANT NOTE:** Please see the HUD Application Manual (page 8) for important HOPWA program priority updates and funding request changes.

## TECHNICAL ASSISTANCE

There will be **six** application workshops CDBG returning (2), ESG Mandatory (2) and First Time applicants (2). Please see the information in the Application Manual for details. **Spaces are limited to the first 35 per session.** Please RSVP to 229-2330. There will not be a HOPWA specific workshop this year.

## APPLICATION PREPARATION

Alteration of any application forms will result in disqualification of application.

The Application should have no more than 30 pages when complete.

When requested to check or mark a section or area of the application, please use a blue or black pen. Computer generated symbols do not require replication.

*All forms (attachments & exhibits) must be completely filled out according to instructions, and all information must be uploaded on to Zoom Grants in order for the application to be accepted.*

If an area does not apply, state N/A, do not leave a question blank.

- **All Exhibits and Attachments must be typed and single sided.**
- **All Exhibits and Attachments must be letter size, (8 ½ x 11).**

The Board President or other person authorized by the Board must sign all Certifications. To authorize individuals other than the Board President to execute the application, the Signatory Authority block on the Certification of Application Form must be completed and signed by the Board President. Failure to complete Signatory Authority in an application signed by someone other than the Board President will render the application unacceptable.

**ACCEPTANCE OF TERMS:** By submitting an application, the applicant accepts all terms, conditions and requirements of this Application. The applicant's proposal will become part of the grant agreement in the event the applicant is awarded funds. The applicant will be bound by what is in the proposal, unless otherwise approved in writing by the City of Las Vegas. **Applicant understands and accepts that the most restrictive conditions may apply.**

The applicant's proposal and other materials submitted in response to the application process becomes the property of the City of Las Vegas and may be returned only at the City's discretion. Applications are public documents and may be inspected or copied by anyone after they have been reviewed, rated and, approved for funding by the City Council. Financial statements included in the application may also be considered public information.

**The City takes no responsibility for content, or any incomplete submissions. All costs of responding to this Request for Proposal are the responsibility of the applicant.**

## APPLICATION INSTRUCTIONS

**ALL APPLICATIONS MUST BE TYPED.** Handwritten applications will be disqualified and will be returned to the applicant. Any additional documents submitted must be on white 8 ½ x 11 paper. **All forms with the exception of the Performance Measures Form, are intended to be one page only. All Exhibits and Attachments must be typed.**

All applications must be submitted utilizing Zoom Grants, no paper submissions will be accepted.

Please count **households** by the anticipated number to be assisted, not by the number in the household. Supportive Services may count unduplicated units of service.

## ELIGIBLE ACTIVITIES

**Rental assistance** includes payment of rent, including utilities, for housing which meets local housing codes / quality standards, HUD's standards for Fair Market Rent in the MSA and rent reasonableness requirements. Persons that receive rental assistance under this program must pay a portion of their rent and utilities as dictated by HUD guidelines. Rental assistance may include project or tenant based rental assistance but **does not** include short-term supportive housing or short-term rent, mortgage, and utility assistance described below. Rental assistance is not emergency assistance but helps individuals access permanent housing.

**Short-Term Rent, Mortgage, and Utility (STRMU) Assistance** provides payments to prevent the homelessness of a tenant or mortgagor of a dwelling for costs accruing over a period of no more than 21 weeks during any 52 week period. While HUD does not require compliance with Fair Market Rent guidelines, the City's guidelines specify that no rent will be paid that is higher than the applicable FMR. Neither local housing codes and housing quality standards, nor rent reasonableness requirements apply to STRMU. However, the City expects the assistance to be reasonable and to be used in emergency situations in order to prevent homelessness. STRMU is not appropriate as on-going assistance when less expensive, more appropriate housing should be obtained to ensure a client remains housed. All short-term rent, mortgage and utility assistance programs must comply with the guidelines dictated by the City.

**Operating Costs for Housing** include costs of property maintenance and upkeep, security measures, insurance, utility costs, furnishings and equipment, operating supplies and other incidental expenses. This category includes costs associated with the operation of Short-Term Supported Housing like emergency and transitional shelters

**Hotel/Motel Vouchers** will assist clients with HIV/AIDS and their families with 30 days of emergency housing (one-time). This practice will provide these clients with temporary emergency shelter until appropriate housing is available. Per HUD, 30 days is the maximum.

**Permanent Housing Placement** helps establish the household in a housing unit and may including reasonable costs of security deposits and first month's rent to prevent homelessness. This shall not exceed two months of rent costs, and should be a onetime per year assistance.

**Acquisition with or without minor rehab** include the costs of purchasing a unit or the down payment of a unit which can be: single family, duplex, 4-plex or multi family. Rehab must be minor.

**Supportive Services** include the costs of providing a wide range of supportive services like health, mental health, assessment, drug and alcohol abuse treatment and counseling, housing case management and other services necessary to ensure the housing stability of the program participant. Although supportive services not directly related to the provision of housing are eligible for HOPWA funding, housing-related activities will be considered a higher priority for funding. (See page 1 of Instructions for limits on SS).

**Administrative Costs** - Each project sponsor receiving a HOPWA grant may use no more than 7 percent of the amount received for administrative costs. A lump sum is not provided and costs may include only costs for general management, oversight, coordination, evaluation and reporting on eligible activities. Such costs do not include costs directly related to carrying out eligible activities, since those costs are eligible as part of the activity delivery costs of such activities.

## INELIGIBLE ACTIVITIES

A number of limitations are placed on activities in the HOPWA regulations. They include but are not limited to the following:

- Funds may be used only for activities that are included in the eligible activities described above and listed as eligible for HOPWA-funding in 24 CFR 574.
- Activities are ineligible if they do not serve low- income persons with HIV/AIDS and their family members who do not live in Clark County.
- STRMU assistance to prevent homelessness may not be used to make deposits and pay first month's rent and utilities for homeless persons. (However, Permanent Housing Placement funds may be used for costs not to exceed two months' rent.)

- STRMU assistance may not be provided for costs accruing for a period of more than 21 weeks in any 52-week period (July 1<sup>st</sup> – June 30<sup>th</sup>).
- HOPWA funds may not be used to pay rental assistance for housing units that do not meet local housing codes / quality standards.
- HOPWA funds may not be used to pay rents that are not comparable for similar or like apartments on the local market. (i.e., rents may not exceed HUD's Fair Market Rents for the area.) HOPWA funds may be used to pay only reasonable, customary deposits and may not be used to pay extraordinary deposits or fees required by owners because the population is viewed as one with special needs.

### **PERFORMANCE MEASURES – Must document compliance with HOPWA National Objectives**

This form documents and describes the program's outcomes, major tasks, outputs, and outcome measurements for the fiscal year. For multiple Outcomes, copy Outcomes and paste them underneath each other, rather than submit three or four separate documents. The Outcome numbers may be changed as needed. The forms are designed to expand.

Please be very specific and state the steps clients will take to achieve success from their participation in the program for which funds are requested. State the Outcome in the box with the # and an explanation in the box under it. Housing clients must be counted by number of households.

Agencies that apply for funds must be able to utilize HOPWA funds in a timely manner, and have staff ready to implement the program. In addition, reporting accurate information is extremely important for Project Sponsors. Both the City and HUD utilize this data to determine if needs are being met, and to document how HOPWA improves the lives of clients with HIV/AIDS and their families.

### **PROGRAM INFORMATION**

Provide brief, clear and concise answers to the questions and statements relating to the project. Unless specifically indicated in the section, no attachments will be allowed.

### **PROGRAM PRIORITIES**

Many times the Community Development Recommending Board (CDRB) cannot recommend fully funding an applicant. Completing the Priorities Section is the only guidance the CDRB has to make funding recommendations. Unless the program cannot be operated without all requested components being funded, do not state that everything in the application is a priority. This will place the application in an all or nothing funding situation. Please use the space provided under the table to explain priority choices. Since only one HOPWA application will be submitted, please prioritize the program components. No more than ten priorities will be considered.

### **NEW\*\* PROGRAM BUDGET FORM (NOW INCLUDED IN THE ZOOM APPLICATION ON A TAB)**

Complete this form for the total program budget for which funds are requested. This form also demonstrates leveraging with cash sources. Leveraging signifies that the program is not dependent on one source of income. **All amounts must be rounded up to the nearest dollar. Do not use cents.**

**NOTE:** Per OMB Regulations, costs of amusement, diversion, social activities, ceremonials, and costs relating thereto, such as meals, lodging, rentals, transportation, and gratuities are not allowable.

**Expense Category** Please list all expenses in the appropriate space. Please complete each applicable line item. If a category listed does not match the agency's categories, the lines titled "**Other**" may be used. Applicants may erase the words in the "Other" category and identify the proper funding source, if required.

### **Administration (limited to 7% of request)**

**Administrative Salaries and Fringe Benefits:** This amount is the total cost for all administrative personnel who do not have a direct relationship with HOPWA Clients. (Key staff, receptionist/office, finance staff, etc.) No Executive Director may charge 100% of their time to any Federal Funds per HUD Regulation and OMB Circulars.

For anything other than administration, Executive Directors may only charge time spent on direct program benefits, such as Case Management, Class Instruction, etc. This amount must also include the total cost of all fringe benefits.

**Audit/Accounting/Legal:** Cost of service. **NOTE:** CPA who audits agency may not also be the agency's bookkeeper, as this would constitute a conflict of interest.

**Rent:** Building or Offices

**Utilities/Telephone:** Electric, Water, Sewer, Gas, Telephone.

**Liability Insurance:** Cost of coverage

**Office Supplies:** May not exceed \$250 per staff member, (ex. 5 employees x \$250 = \$1,250)

**Other Misc:** Costs that would not fit in any other category (specify)

### **Direct Client Care Salaries**

Salaries of employees that provide direct services or housing to HOPWA clients. (case managers, counselors, advocates, etc.)

### **Housing Assistance Salaries**

**Short-Term Rental, Mortgage, Utility Assistance**

**Long-Term Tenant- or Project-Based Rental Assistance**

### **Housing Operations**

**Salaries including Fringes** – Staff that provide this service

**Equipment/Furnishings** – Cost of renting or purchasing equipment.

**Housing Leasing** – Funding to pay lease payments for clients' housing units.

**Insurance**

**Maintenance**

**Operations**

**Security**

**Utilities**

**Other Incidental Costs**

**Hotel/Motel Vouchers**

### **Supportive Services**

**Salaries including Fringes** – Staff that provide this service

**Personal/Emergency Assistance**

**Alcohol/Drug Abuse Services**

**Child Care/Children's Services**

**Employment Assistance**

**Health/Medical Intensive Care** – Health, Medical, and Intensive Care Services

**Life Skills** – Outside of Case Management

**Mental Health Services**

**Nutritional Services/Meals**

**Outreach/Education**

### **Permanent Housing Placement**

**Security Deposits** (up to one month – non refundable)

**Utility Deposits**

### **Permanent Housing (Purchases)**

**Acquisition (may include minor rehab)**

**HOPWA Request** – Represents the amount or gap funding needed to fill the budget shortfalls. A budget gap is created when the agency does not have enough resources to pay for an item. HOPWA is intended to fill gaps in the budget for eligible expenses.

**Agency Funds and In-Kind** – *Non-grant* revenue the agency receives for the program, i.e. private funds, program fees, donations, etc. These are not other federal/local/state funds received from other

sources. Agency may include up to 25% of In-Kind in this column, which must match the In-Kind form, and be broken out in the table beneath the Budget Form.

**Other Federal Funds** – Federal Funds applied for or awarded for the program, i.e. other CDBG, ESG, HOME, Title XX, Department of Labor, Other HUD funds, FEMA, etc.

**State and Local Grants** – State grants or other Local funds for the program such as Workforce Investment Programs, Welfare to Work, etc.

**Foundations and Other Public Funds** – Revenue from foundations, private grants, endowments, etc.

### **THREE YEAR FUNDING HISTORY (INCLUDED IN THE ZOOM APPLICATION ON A TAB)**

This replaces the previously uploaded Excel Form and documents the agency's funding history for the past three years. The first column is the year for which you are applying. This form will total the figures. You can erase the word "Other" and put your own label.

### **CERTIFICATION FORM (2 PAGES – Attachment 1)**

This form, which documents compliance with the Civil Rights Act, Americans with Disabilities Act, and Eligibility to Participate, is required by HUD. (For example, a debarred contractor could be a non-profit agency, a construction contractor, or a consultant who has been barred from receiving Federal funds.) This form further documents compliance with the Certification of City of Las Vegas Affiliation, and confirms whether any member of the organization, paid or volunteer, has an affiliation with the City of Las Vegas. The Board President or the designee must sign this form. Please type the name of the person who will be signing the form.

This Form also certifies that the Board of Directors is aware of and supports the application for funding. Additionally, this form specifies who has signature authority. A non-agency mailing address for the President of the Board of Directors must be provided in the space provided on this form. The Board President must sign this form. In addition, please type the name of the person who will be signing the form where it says "type name here". This form also certifies that no changes in the agency's IRS Non-profit designation has occurred.

### **Attachment and Exhibit reminder**

All forms must be uploaded onto the Zoom Grants site. Do not change the format of the Attachments, and submit them in the Microsoft Program in which they are posted: Word or Excel. The Certification Form (Attachment #1) must be signed and scanned as a PDF file. With the exception of the Certification and Performance Measures Forms, the Excel Attachment documents are meant to be one page.

Exhibits must be scanned and uploaded. Most will be PDF format, however, if the system allows you to upload them in Word that is acceptable. There are checks and balances throughout the Zoom Grant application. The system will not allow an incomplete application to be submitted.

**PLEASE NOTE:** The software does not check for quality, accuracy, or review the information submitted, so please print the application prior to submittal to ensure completeness of the information you have provided. You may make changes up until the deadline, even after hitting submit. No late applications will be accepted.

### **Secretary of State and CLV Business License Explanation:**

In order to apply for CLV funds, all agencies must be in Good Standing with the Nevada Secretary of State's Office, and must have a current City of Las Vegas Business License for the programs for which they are applying, by the close of the application period in addition to being in compliance with the IRS 990 submittal requirements. **This will be verified by NSD staff.** Agencies that cannot comply with these criteria will not move forward for funding consideration.

**IRS 990 Guidelines.** Agencies must be in good standing with the IRS and must not have had their status revoked for non compliance with the 990 tax submission guidelines. This is verified with the IRS and Guidestar websites. No exceptions. (You must submit the 990 in its entirety, not just the letter that says it was submitted). See (ACFS) Section of Audits below.

## **REQUIRED EXHIBITS EXPLANATION**

**Documentation of Non-profit status:** All HOPWA applicants must show proof of current non-profit status. This is done by submitting a copy of the letter from the Internal Revenue Service (IRS). No pending status will be accepted. Letters must be ***legible*** to be acceptable. If the letter is more than 10 years old, please request an updated one from the IRS. Letters more than 10 years old will not be accepted. Please call the IRS Exempt Organizations Div. at 1-877-829-5500 to request a free copy.

**Operating Budget:** Submit a copy of the entire agency's Operating Budget with revenue and expenditures.

**Audits:** All applicants must submit an audit (A-133 Audit, Audited Financials, or an Annual Certified Financial Statement). Except for A-133 Audits, Audits may not be older than 2 years from the application date. Applicants **must submit** one of the following with their application:

**A-133:** Organizations that expend \$750,000 or more in previous year in federal awards shall have a single or program specific audit (**A-133**) conducted for that year. A copy of your most recent A-133 must be attached. No A-133 Audit over 2 years old will be accepted.

**Audited Financials\*\*:** Agencies with revenue of \$200,000 - \$749,999 must submit Financial Statements audited by a CPA. This means that a CPA has audited the agency's records in accordance with generally accepted accounting practices and procedures, and provided a hard copy. Audit must not be over 2 years old and must include management letters.

**Annual Certified Financial Statement (ACFS):** Agencies with revenue less than \$199,999 must submit an ACFS, in addition to their IRS stamped copy of their most recent IRS 990 form. This is the lowest threshold criteria and will only be accepted from those non-profits who can document that they did not qualify for an A-133 or regular audit. Annual Certified Financial Statements (ACFS) **must be certified** (signed and dated) by the Treasurer and the Board President, must be for the previous audit year, must include the ACFS Statement below and include a balance sheet and profit and loss statement for the previous year. To obtain an IRS stamped copy of your submitted 990, go to [www.guidestar.org](http://www.guidestar.org).

In addition, agencies with revenue less than \$199,999 must also submit a copy of their **IRS accepted Form 990** for the previous year, **and**  
**Previous 6 months of Agency bank statements** (June – November)

**If you qualify under the Annual Certified Financial Statement (ACFS) clause under Audits, YOU must submit the 990 in its entirety, not the form that says it was submitted. Failure to submit the 990 document will result in disqualification of the application.**

Annual Certified Financial Statements **must** have the following statement: "We, the undersigned, as Executive Director and Treasurer of (Name of Agency), hereby certify that, to the best of our understanding and knowledge, the attached Financial Statements fairly and accurately represent the financial condition and operations of this organization."

**\*\*The City audit policy:** Any agency that expends between \$200,000 – \$749,999 in federal funds during the calendar year will be required to have a CPA Audited Financial Statement. The funds expended may be from one or multiple federal sources. If allowable by program regulations, the City may only pay for the portion of the audit, which represents the percentage of City federal funds in the program budget.

**Board of Directors:** Submit a copy of the most recent list of the entire Board of Directors.

**Articles of Incorporation:** Submit the articles in their entirety. Please note the **entire** Articles of Incorporation must be legible to be acceptable.

**Partnership Letters and/or Memorandum Of Understanding:** Housing Providers should attach to receive the maximum score for partnerships. **Supportive Service Only Providers must** attach MOU's to demonstrate how they will document their follow-up procedures for Housing Plan compliance by their clients. HOPWA Regulations state that all clients must have and adhere to their Housing Plan developed with their HOPWA Case Manager.